Practitioner's Docket No. EH-10	<u>)997(03-531)</u>	PATENT
COMBINED DECLARATION AND POWER OF ATTORNEY		
(ORIGINAL, DESIGN, NATI	IONAL STAGE OF PCT, SUPPLE CONTINUATION, OR C-1-P)	mental, divisional,
As a below named inventor, I hereby dec	clare that:	
7	TYPE OF DECLARATION	
This declaration is of the following type: (check one)	<ul> <li>⊠ original.</li> <li>□ design.</li> <li>□ supplemental.</li> <li>□ national stage of PCT.</li> <li>□ divisional.</li> <li>□ continuation.</li> <li>□ continuation-in-part (C-I-P)</li> </ul>	
INVE	NTORSHIP IDENTIFICATION	ON
My residence, post office address and croriginal, first and sole inventor (if only on names are listed below) of the subject mentitled:	ne name is listed below) or an original	inal, first and joint inventor (if plural
	TITLE OF INVENTION	
SPANWISELY VARIABLE DENSITY PEDESTAL ARRAY		
SPEC	TFICATION IDENTIFICATI	ON
the specification of which:		
(a) is attached hereto.		
(b) was filed onand was amended on	as Serial No. (if applicable).	
(c) was described and claimed in PC on		ticle 19 on
(y ap	hucanes.	

## ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and

□ in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 C.F.R. § 1.98.

## POWER OF ATTORNEY

I hereby appoint the practitioners practicing at the following Customer Number to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

34704

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO:

The above Customer Number.

Barry L. Kelmachter (203) 777-6628 - ext. 112

## **DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or

imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURE(S)

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(signature)	(signature)	
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THIS DECLARATION ENDS WITH THIS PAGE.